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Bib Data Sheet

CONFIRMATION NO. 1689

<b>SERIAL NUMBER</b> 10/707,690	<b>FILING OR 371(c) DATE</b> 01/05/2004 <b>RULE</b>	<b>CLASS</b> 438	<b>GROUP ART UNIT</b> 2818	<b>ATTORNEY DOCKET NO.</b> FIS920030239US1
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\*\* CONTINUING DATA *None DV* \*\*\*\*\*

\*\* FOREIGN APPLICATIONS *None DV* \*\*\*\*\*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 03/19/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 22	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <i>Signature</i> Examiner's Signature Initials				

**ADDRESS**

29625

**TITLE**

STRUCTURES AND METHODS FOR MAKING STRAINED MOSFETS

<b>FILING FEE RECEIVED</b> 806	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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